

Electronic Supplementary Information

Imaging cervical cytology with scanning near-field optical microscopy (SNOM) coupled with an IR-FEL

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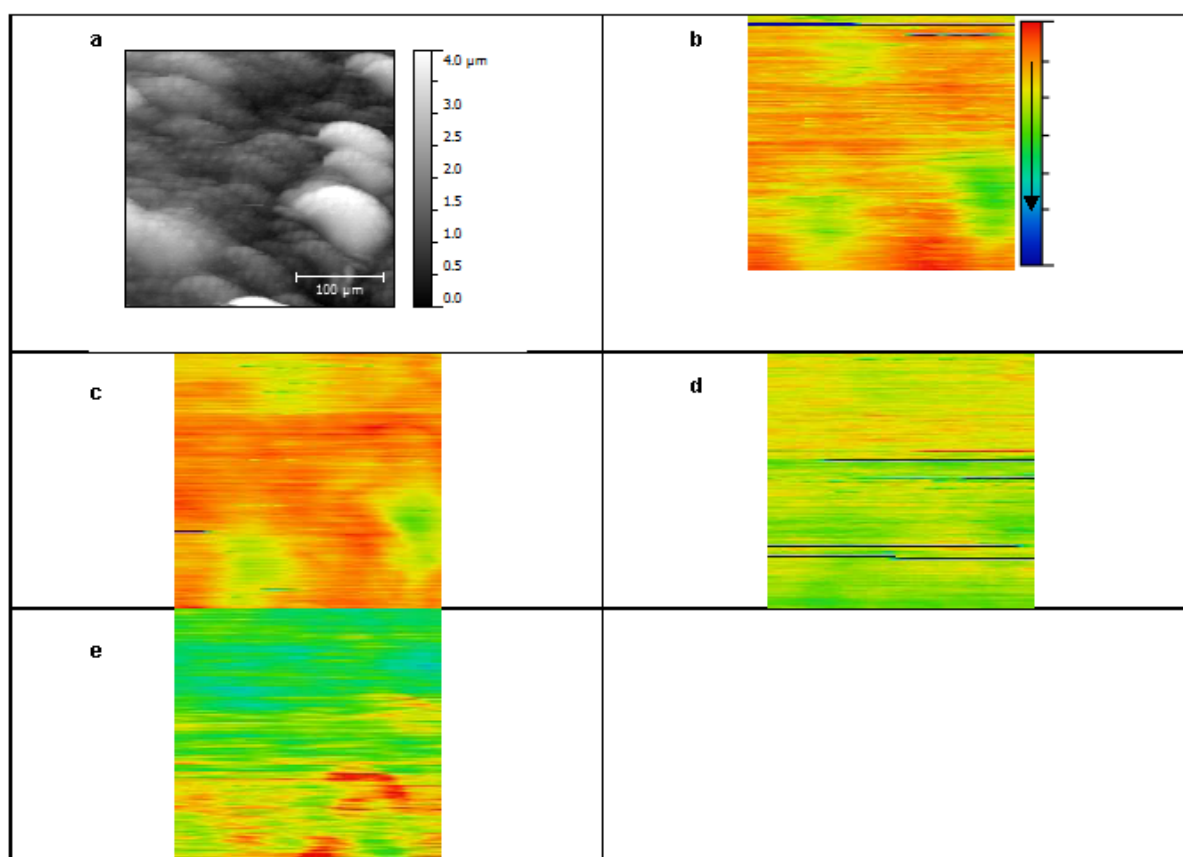


Figure S1. SNOM-IR-FEL images of normal cells: (a) topography; **transmission images:** (b) Amide I; (c) Amide II; (d) Lipids; and, (e) DNA. The colour scale bar arrow in (b) applies to (b-e) and indicates increasing biomarker absorption. SNOM-IR-FEL: Scanning near-field optical microscopy coupled with an infrared-free electron laser.

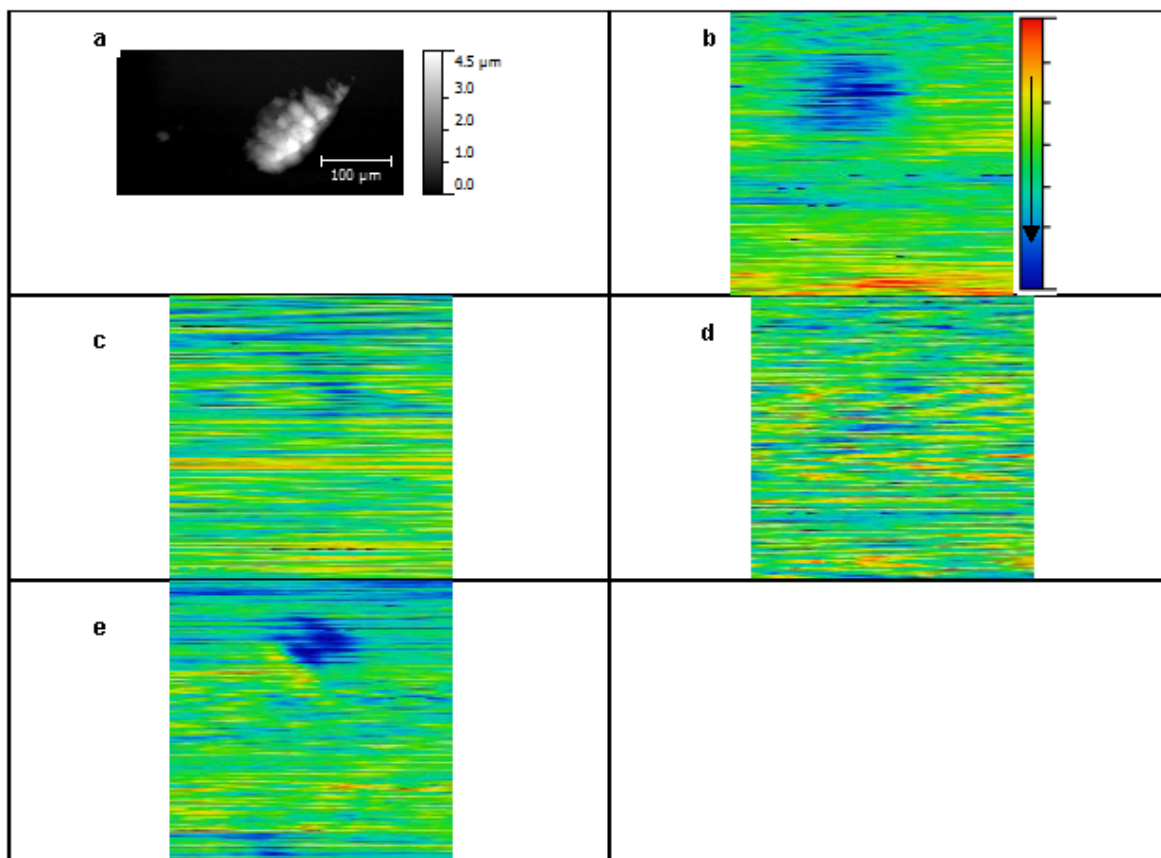


Figure S2. SNOM-IR-FEL images of low-grade dyskaryosis: (a) topography; **transmission images:** (b) Amide I; (c) Amide II; (d) Lipids; and, (e) DNA. The colour scale bar arrow in (b) applies to (b-e) and indicates increasing biomarker absorption. SNOM-IR-FEL: Scanning near-field optical microscopy coupled with an infrared-free electron laser.

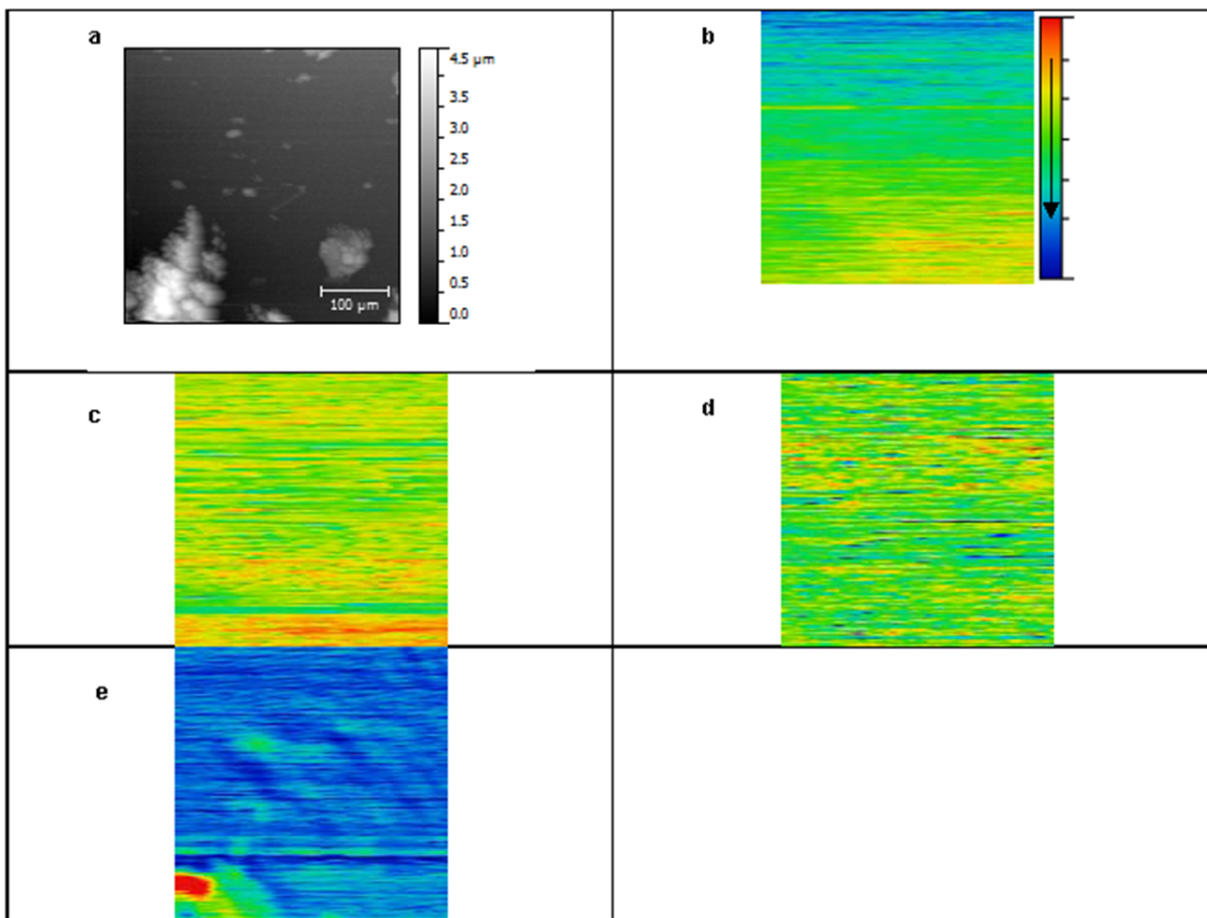


Figure S3. SNOM-IR-FEL images of high-grade dyskaryosis: (a) topography; transmission images: (b) Amide I; (c) Amide II; (d) Lipids; and, (e) DNA. The colour scale bar arrow in (b) applies to (b-e) and indicates increasing biomarker absorption. SNOM-IR-FEL: Scanning near-field optical microscopy coupled with an infrared-free electron laser.

The SNOM-IR-FEL images and associated topography of the pre-invasive lesion (CIN2, HGCGIN) are presented in the main body of the text (see Figure 6).

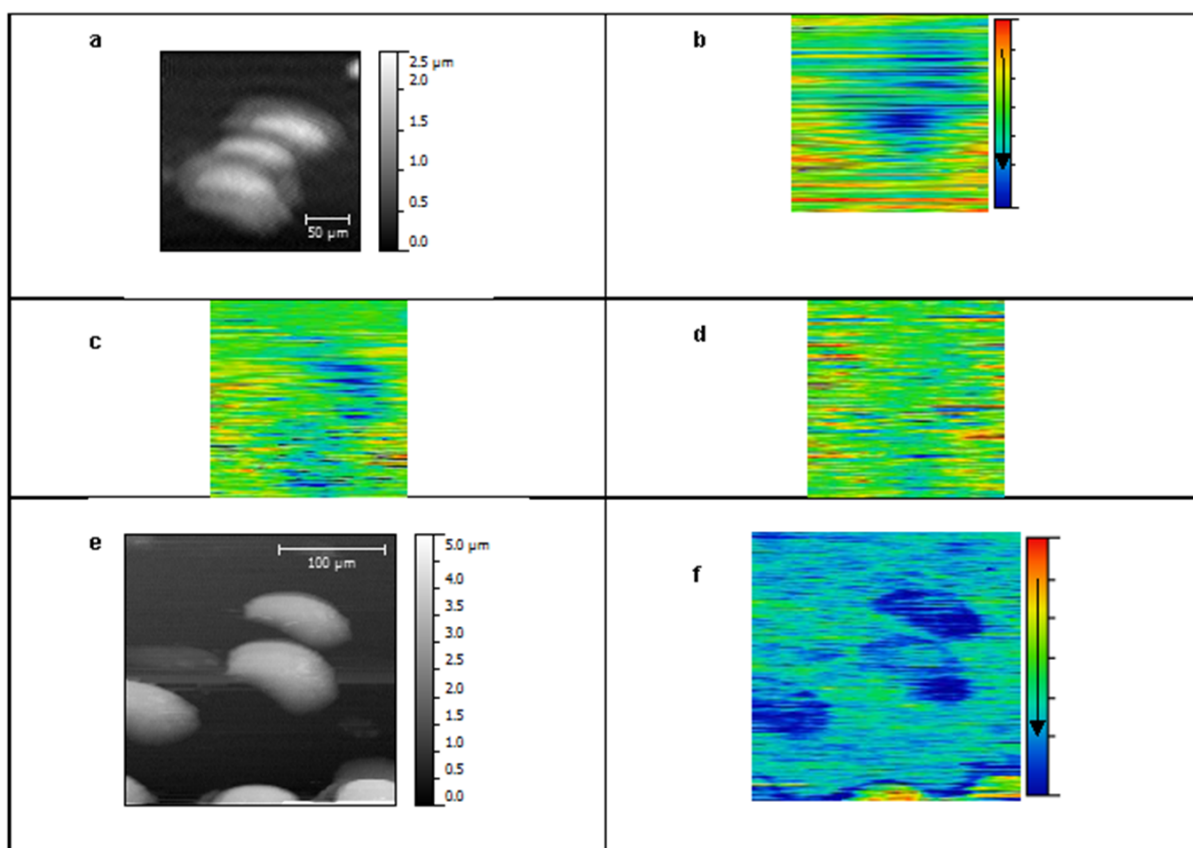


Figure S4. SNOM-IR-FEL images of adenocarcinoma Stage 1B1: (a) topography; **transmission images:**

(b) Amide I (imaged from different site to topography shown here); (c) Amide II; and, (d) Lipids. (e)

Topography of cells from a second area; and, (f) the corresponding SNOM transmission image for the DNA

biomarker. The colour scale bar arrow in (b) applies to (b-d, f) and indicates increasing biomarker absorption.

SNOM-IR-FEL: Scanning near-field optical microscopy coupled to an infrared-free electron laser.

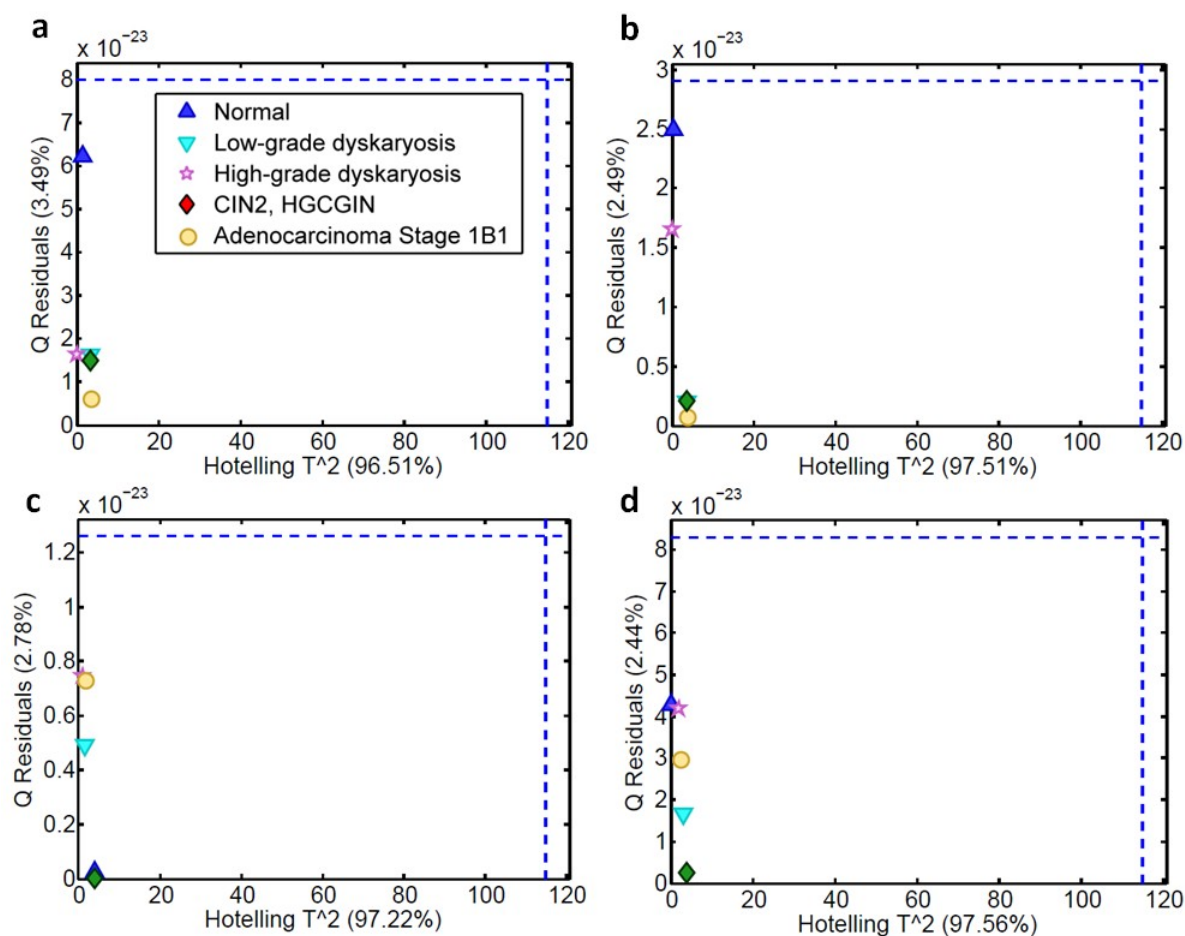


Figure S5. Transmission SNOM-IR-FEL: Hotelling T^2 versus Q Residuals graphs for the type of cells according to each biomarker response: (a) Amide I; (b) Amide II; (c) Lipids; and, (d) DNA. All 5 samples fell within the 95% confidence limits (blue dotted line), and shows there were no outliers. The score for Hotelling T^2 ranged from 96.51% to 97.56%; whilst the score for Q residuals ranged from 2.44% and 3.49%. CIN2, HGCGIN: Cervical intraepithelial neoplasia 2, high-grade cervical glandular intraepithelial neoplasia; SNOM-IR-FEL: Scanning near-field optical microscopy coupled with an infrared-free electron laser.

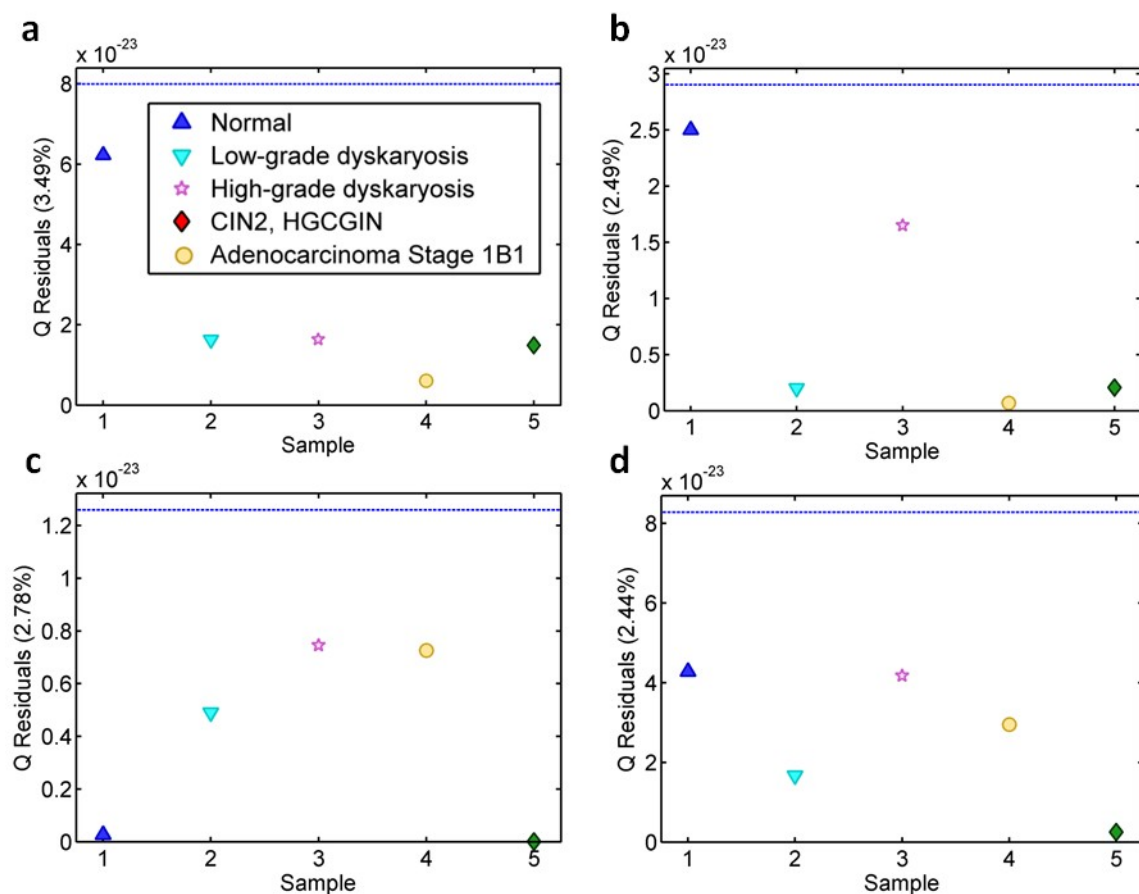


Figure S6. Transmission SNOM-IR-FEL: Validation of the PCA model using Q Residuals to measure variation outside the PCA model for each sample according each biomarker response: **(a)** Amide I; **(b)** Amide II; **(c)** Lipids; and, **(d)** DNA. The optimal score for Q Residuals is 0% and here ranged from 2.44% to 3.49%. All 5 samples fell within the 95% confidence limits (blue dotted line), shows there were no outliers and that the data fits the model well. CIN2, HGCGIN: Cervical intraepithelial neoplasia 2, high-grade cervical glandular intraepithelial neoplasia; SNOM-IR-FEL: Scanning near-field optical microscopy coupled with an infrared-free electron laser.

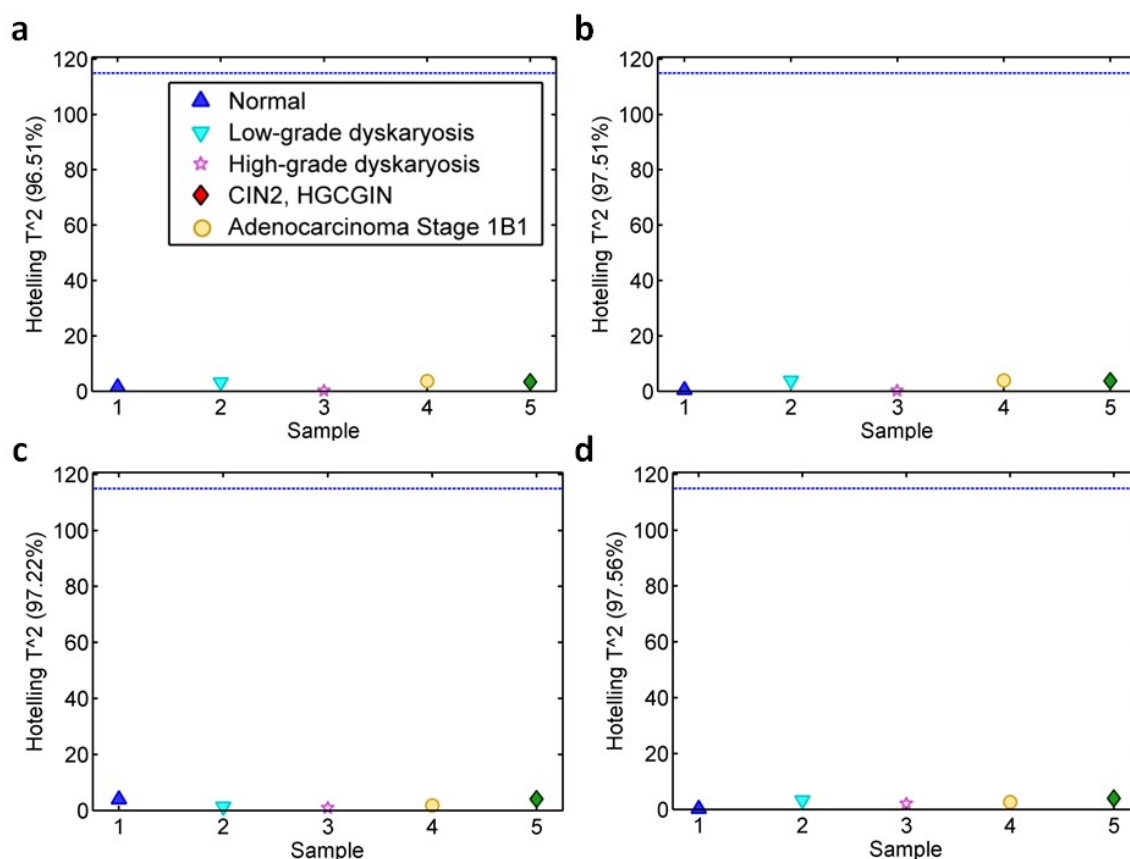


Figure S7. Transmission SNOM-IR-FEL: Validation of the PCA model using Hotelling T^2 to measure variation within the PCA model for each sample according each biomarker response: **(a)** Amide I; **(b)** Amide II; **(c)** Lipids; and, **(d)** DNA. The optimal score for Hotelling T^2 is 100% and here ranged from 96.51% to 97.56%. All 5 samples fell within the 95% confidence limits (blue dotted line), shows there were no outliers and that the data fits the model well. CIN2, HGCGIN: Cervical intraepithelial neoplasia 2, high-grade cervical glandular intraepithelial neoplasia; SNOM-IR-FEL: Scanning near-field optical microscopy coupled with an infrared-free electron laser.

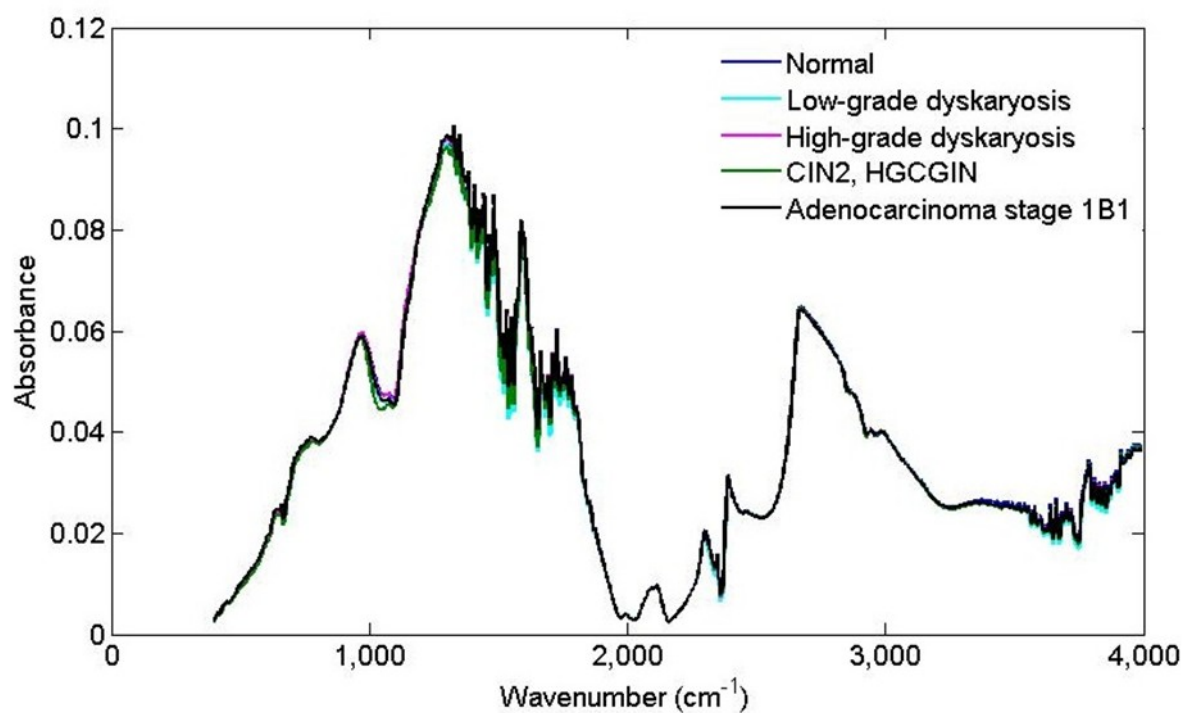


Figure S8: ATR-FTIR spectroscopy: Average infrared spectra of cell types.

ATR-FTIR spectroscopy: Attenuated total reflection Fourier-transform infrared spectroscopy; CIN2, HGCGIN: Cervical intraepithelial neoplasia 2, high-grade cervical glandular intraepithelial neoplasia.

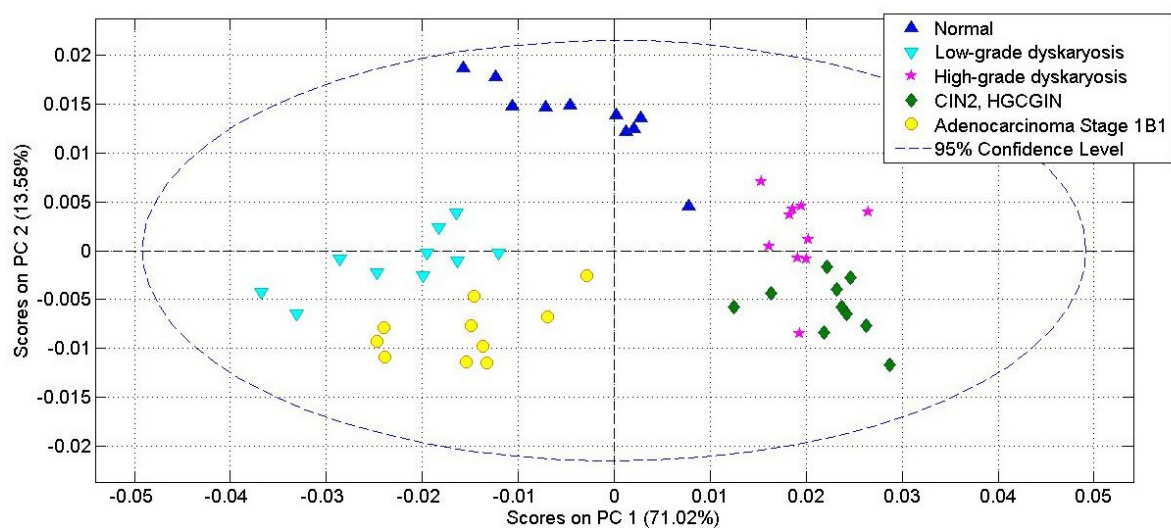


Figure S9. ATR-FTIR spectroscopy: Scores plot of 1st and 2nd principal components at a 95% confidence level.

ATR-FTIR spectroscopy: Attenuated total reflection Fourier-transform infrared spectroscopy; CIN2, HGCGIN:

Cervical intraepithelial neoplasia 2, high-grade cervical glandular intraepithelial neoplasia; principal components.

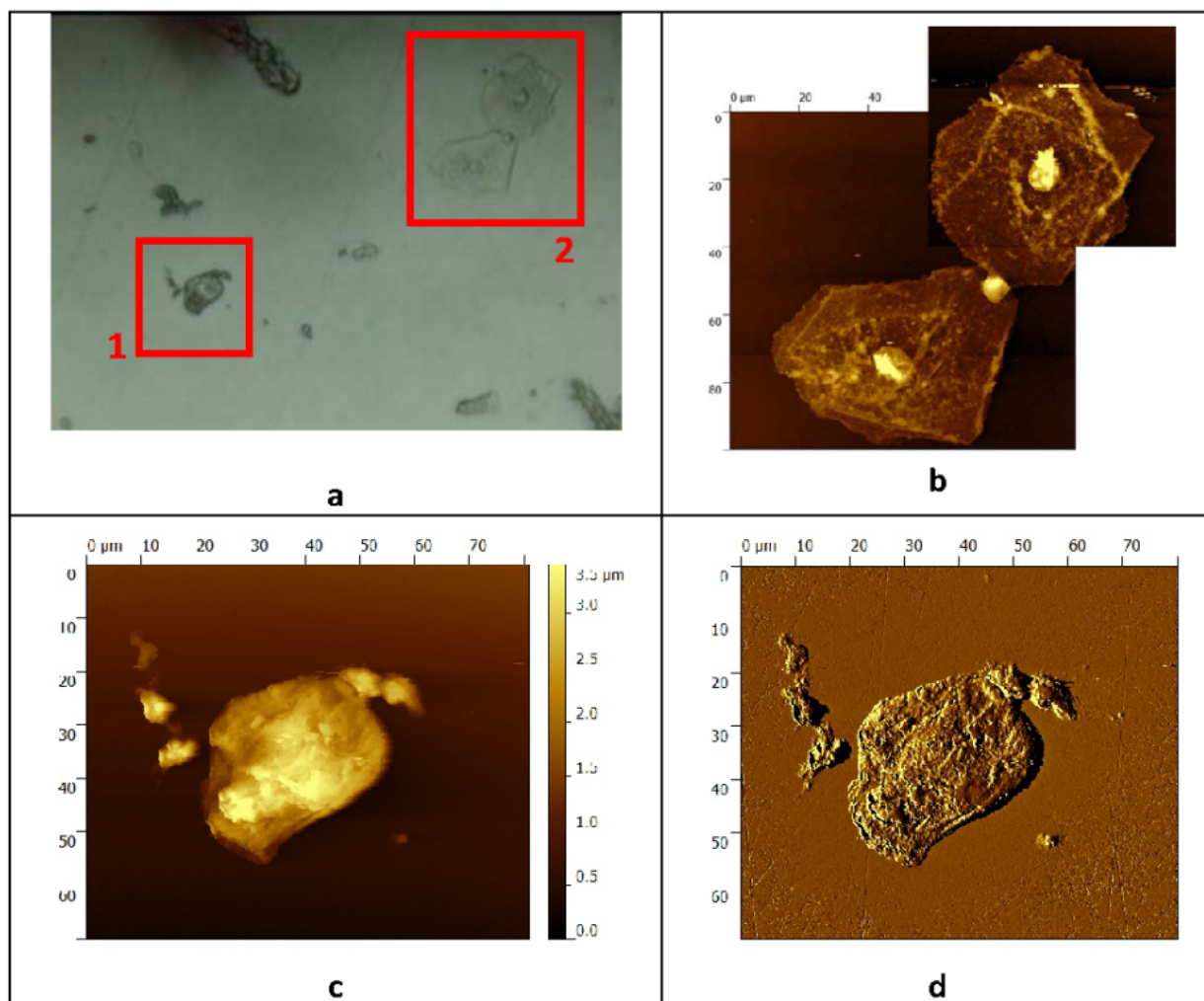


Figure S10. AFM imaging of adenocarcinoma Stage 1B1: (a) Optical image ($\times 10$ magnification) identifying cells for investigation by AFM; and, (b) AFM topography image of two intermediate glandular cells [area 2 in (a)], the lower cell has two nuclei. The cells exhibit a long axis of $\sim 75 \mu\text{m}$. The cell thickness was measured at $\sim 200 \text{ nm}$, whereas the nuclei protruded $\sim 1 \mu\text{m}$ in height from the substrate. (c) AFM topography; and, (d) deflection image of a cell identified [area 1 in (a)] as having a single enlarged nucleus separated from the rest of the cell by a halo. AFM: atomic force microscopy.

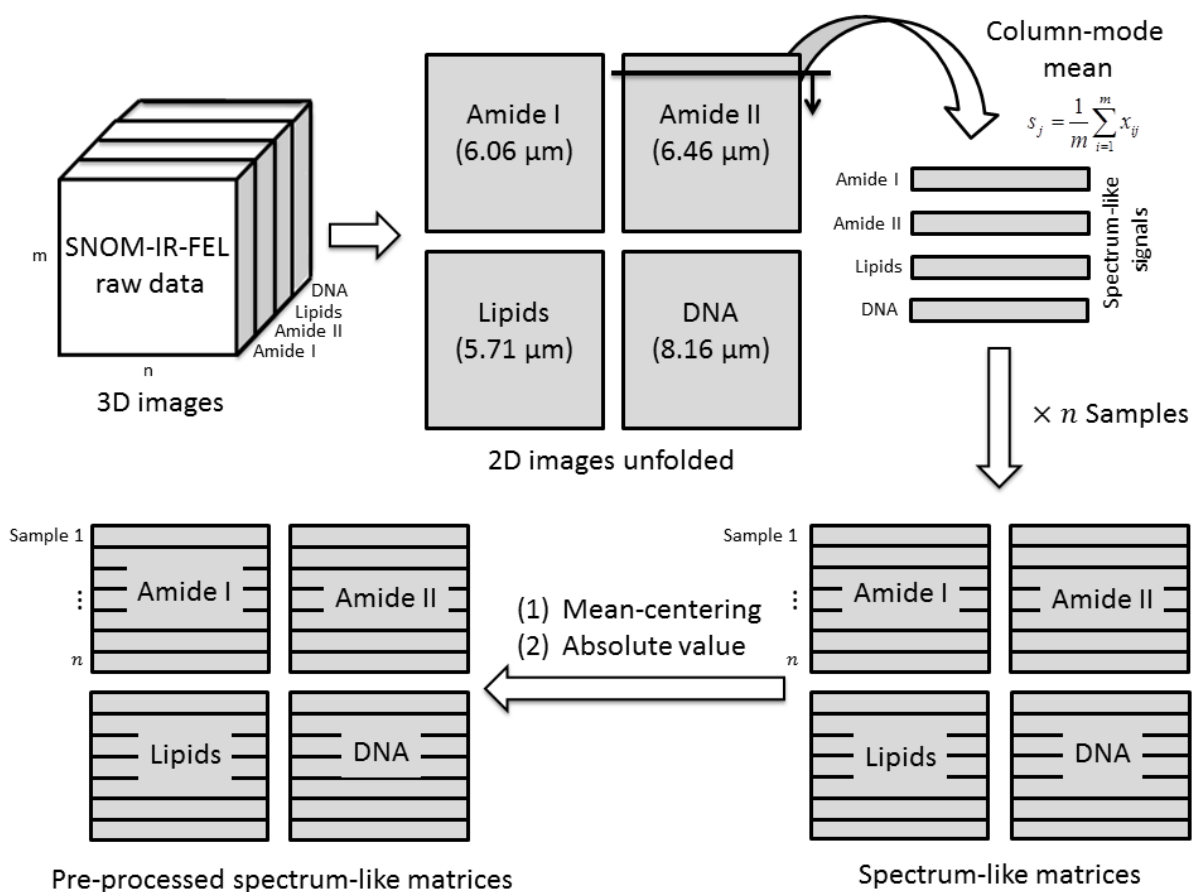


Figure S11. The computational steps taken in processing the data.